Food-Based Dietary Guidelines: Best Practices in Global Development and Implementation

- 9:45 a.m. 10:45 a.m. Friday, 7/21/2017 | Constitution Ballroom
 - Society for Nutrition Education and Behavior



- Introduction (Seung-Yeon Lee, PhD, 2016-2017 DINE Chair)
- **Presentations**
 - Yenory Hernandez-Garbanzo, PhD
 - Mary Murimi, PhD
 - Luiza Torquato, MS
 - Serah Theuri, PhD, RD
- **Q & A**

Co-organized with Dr. Serah Theuri with help from the DINE Annual Conference Planning Committee Sponsored by DINE and United Sorghum Checkoff Program

Outline



International Nutrition Education





Yenory Hernandez-Garbanzo, PhD



Division (ESN), FAO 2013-2014 DINE Chair development



International Nutrition Education

- Nutrition Specialist, Nutrition and Food Systems
- **SNEB Foundation Board of Trustee**
- **Research interest: formative evaluation to guide the** design and implementation of inter-sectorial nutrition education programs; program evaluation and survey
- Areas of work: Technical support and capacity building to UN Member Countries on areas related to FBDGs and school food and nutrition education



Mary Murimi, PhD



President of SNEB populations

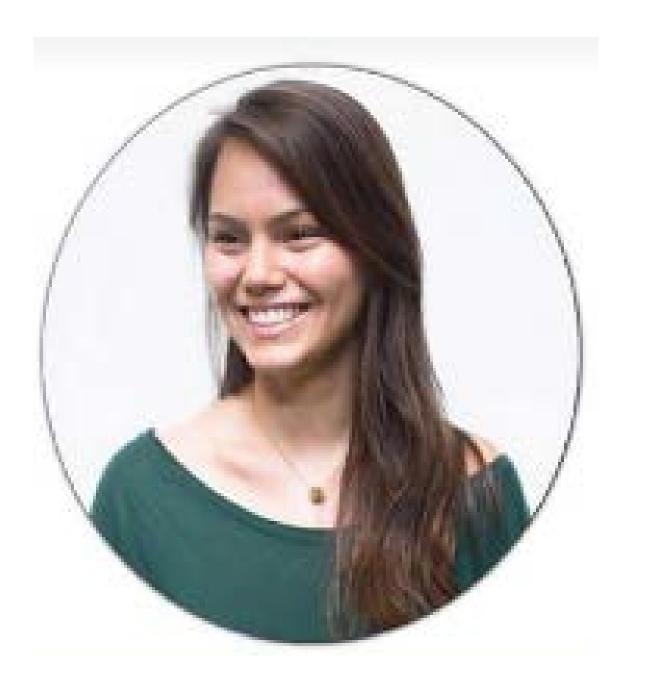


International Nutrition Education

- **Professor of Nutrition at Texas Tech and the Chancellor** of Daystar University in Kenya
- **Associate Editor for JNEB**
- **Research interests:** Environmental factor on nutrition status; coping strategies for food insecurity and factors that influence dietary behavior among low-income



Luiza Torquato, MS



- •Technical Advisor of the Federal Council of Nutritionists in Brazil
- Researcher at the Observatory of Food Security and Nutrition Policies at the University of Brasilia
- Educato Brazil
- •Research interests: Food and Nutrition Education and public policies to guarantee the Human Right to Health and Human Right to Adequate Food



International Nutrition Education

Educator of the Slow Food Movement



(>)

Serah Theuri, PhD, RD



- Associate Professor, Nutrition at University of Southern Indiana
- 2014-2015 DINE Chair
- Research interest: food access in urban underserved communities and the impacts of food insecurity on health status
- Work with her students in providing nutrition education to low-income adults at the University of Southern Indiana's Community Health Centers.
- Published articles on food insecurity and clinical findings of her community project



International Nutrition Education



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DINE Dinner:

7 pm on 7/22 (Saturday) at the New Big Wong Restaurant (610 H St NW) **** Vegetarian options available****

Dinner Business Meeting: 7 am -8 am on 7/23 (Sunday) in Independence F-I





Food and Agriculture Organization of the United Nations

Food Based Dietary Guidelines at Global Level

Setting the Context: FAO's Perspective





By Yenory Hernández-Garbanzo, PhD Nutrition and Food Systems Division, FAO, HQ



Current Team at FAO HQ Working with FBDGs

Ana Islas Focal Point for FBDGs Development

Fatima Hachem, Team Leader

Melissa Vargas

... Many other collaborators at FAO HQ, Regional and Country Level...

Acknowledgements

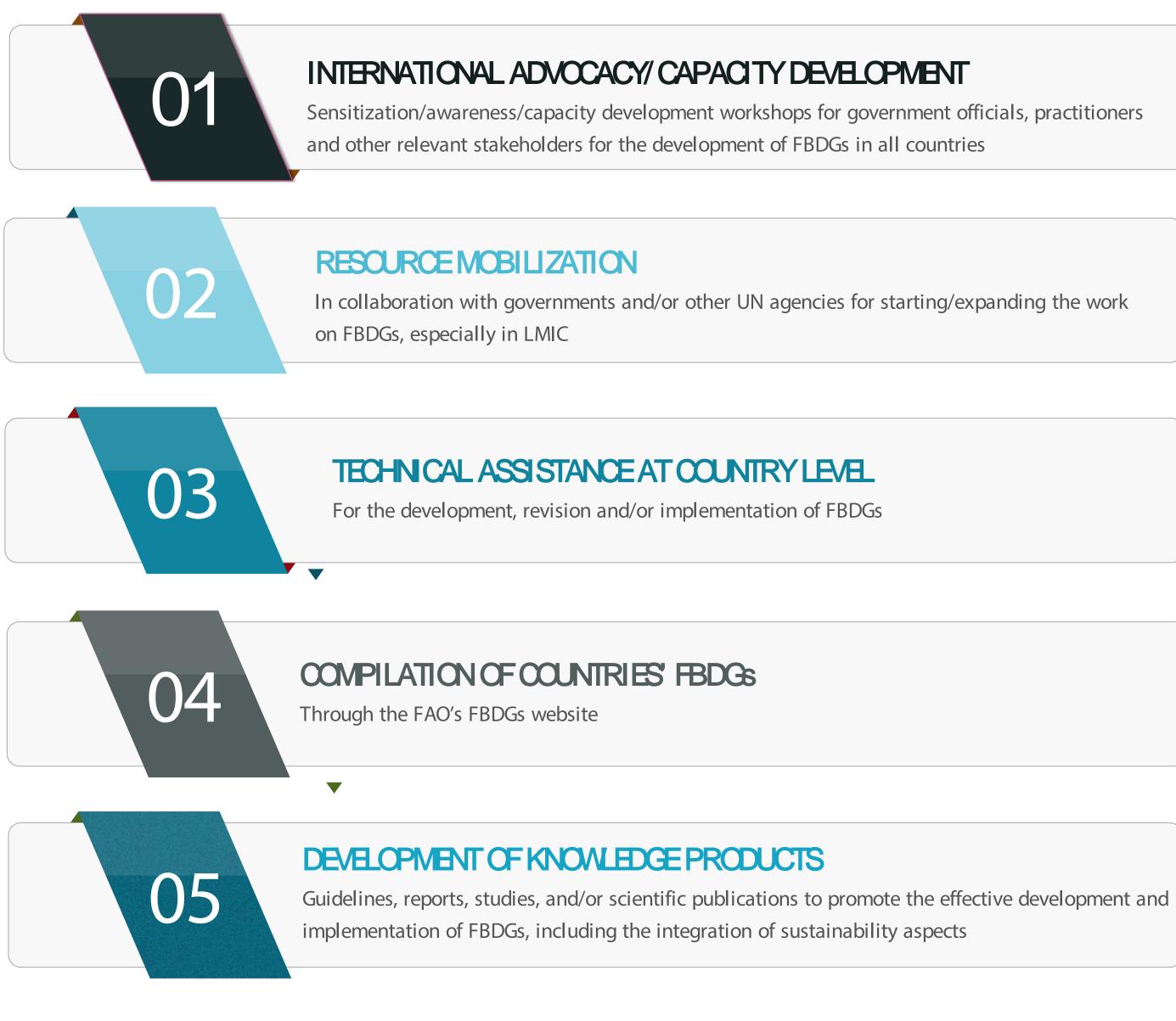
Ramani Wijesinha-Bettoni

Focal Point for FBDGs Implementation

Yenory Hernández-Garbanzo



FAO'S WORK ON FOOD BASED DIETARY GUIDELINES



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Strong presence on the ground to support UN Member countries in the preparation of their FBDGs- at different levels

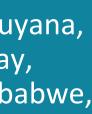


• 2015-present:

• Sierra Leone, Kenya, Afghanistan, Guyana, Panamá, Colombia, Ecuador, Uruguay, Suriname, Tanzania, Swaziland, Zimbabwe, Zambia, Mauritania, Niger

• 2016:

• Regional workshops: African Anglophone and Francophone countries (n=24)



FBDGs CONTEXT: WHY NOW?

Source: Summary Report EFSA Scienti c Colloquium 5, 21-22 March 2006 - Parma, Italy

NORTH AMERICA

Poor dietary habits Physical inactivity Overweight & obesity Obesogenic environments

Nutrition Transition

LATIN AMERICA & CARIBBEAN

Changing dietary habits Physical inactivity Overweight & obesity Food insecurity

Overarching Paradigm: Different forms of Malnutrition+ Changing Dietary Patterns

EUROPE

High fat intake Changing dietary habits Physical inactivity Overweight & obesity

ASIA & PACIFIC

Food insecurity Infectious diseases Poor sanitation & higyene Overweight

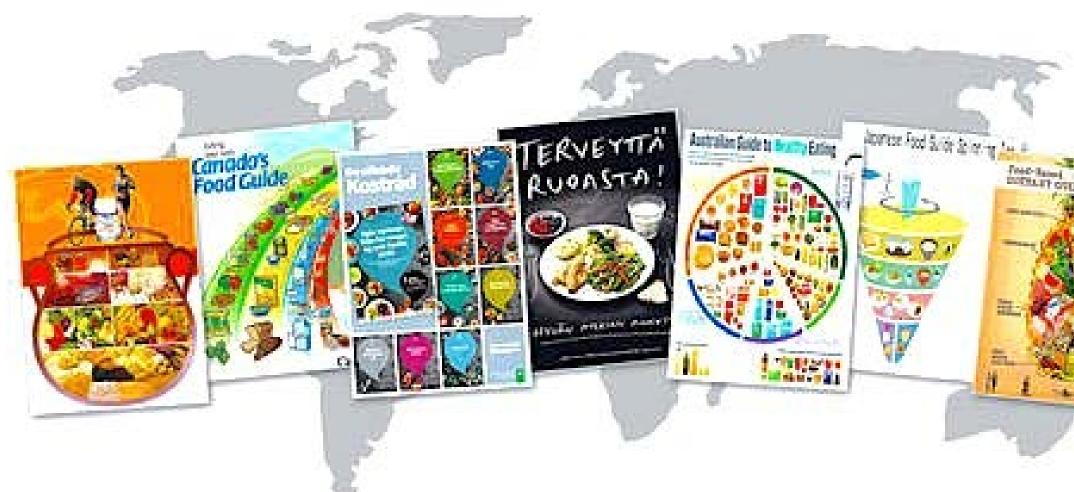
AFRICA

Food insecurity Poor breastfeeding practices Infectious diseases Overweight

Emerging Issues: Urbanization+Effect of Climate Change on Food Availability

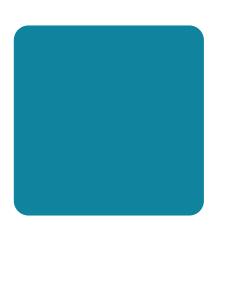


FBDGs: WHAT ARE THEY AND FOR WHAT?



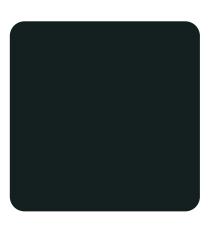
- FBDGs are a set of evidence-based, easily understood, behavior-focused messages for the general public
- FBDGs take into account a country's food availability, diet patterns and food culture, and nutrition-related issues.





TOOL TO PROVOTE:

- Nutritional well-being
- Desirable consumption patterns



TOOL TO PREVENT:

- Malnutrition and diet-related diseases
- Unsustainable food systems

TOOL TO PROVIDE GUIDANCE:

- Nutrition education programs
- Food, agriculture and trade policies



FBDGS: KEY ELEMENTS



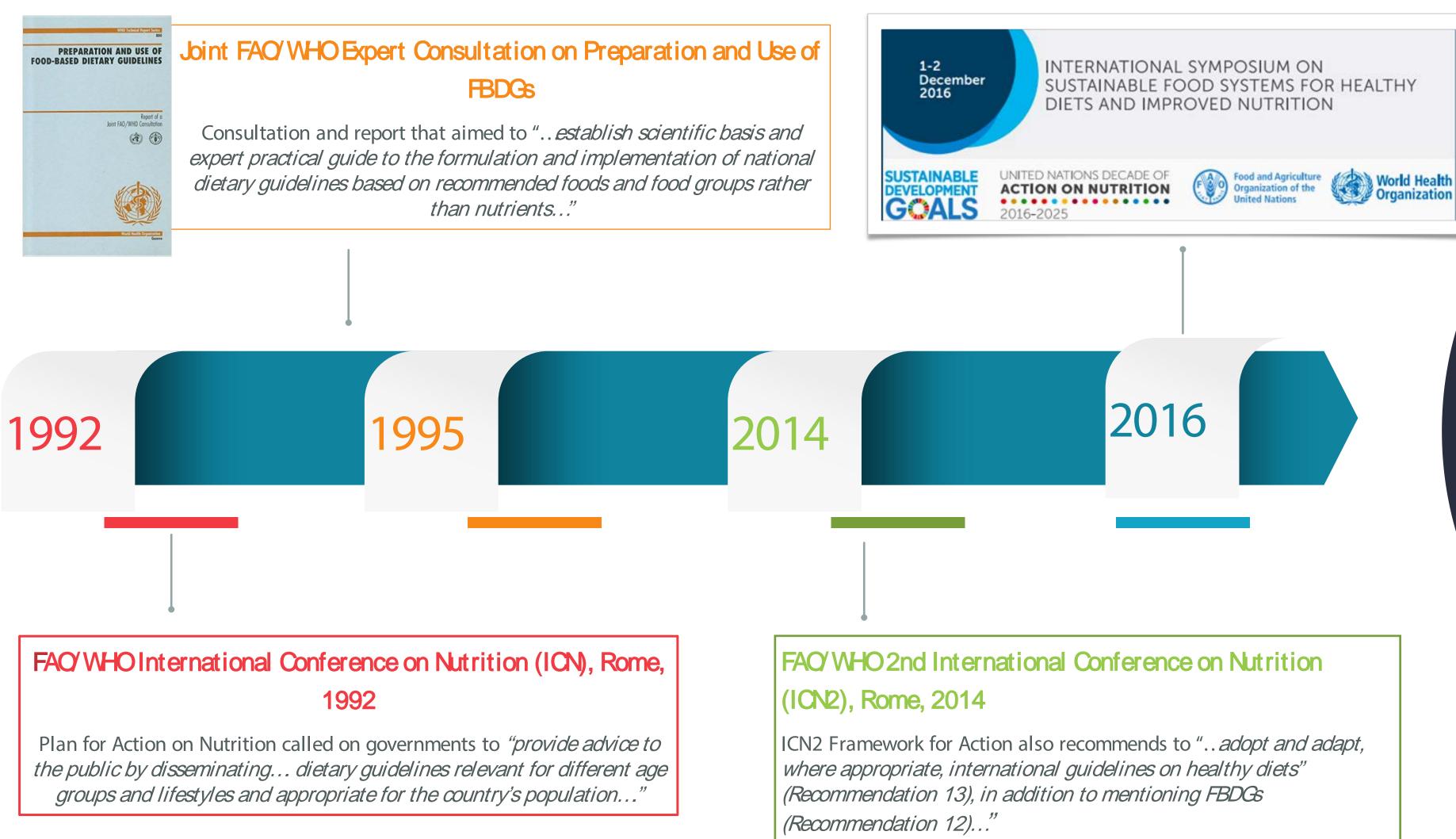




International Advocacy & Capacity Development

Part One

HOW THE FACY WHO'S WORK WAS STARTED?







FBDGs CURRENT ROLE IN THE INTERNATIONAL AGENDA

UNITED NATIONS DECADE OF **ACTION ON NUTRITION** 2016-2025



A Spotlight on the **UN Decade of Action on Nutrition** (2016 - 20225)

- FBDGs encourage...

 - sustainable diets...

FBDGs can be instrumental in advocating for change

• ... Consumers to adopt nutrition- focused behaviours and...

... Policy makers to adopt policies that create an enabling environment for

• ... both of which would lead production systems to perform better by producing a more diverse range of foods in a sustainable manner...

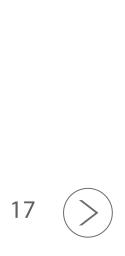
> Stineke Oenema UNSON Coordinator



>100 Countries with FBDGs



In Africa only six countries: Benin, Namibia, Nigeria, Seychelles, Sierra Leone and South Africa



2015: FAO'S CAPACITY DEVELOPMENT WORKSHOPS FOR SOUTHERN AFRICA: 24 COUNTRIES 2016: ZAMBIA, SWAZLAND, ZIMBABWE, TANZANIA, MAURITANIA & NGER HAVE STARTED THE PROCESS FOR DEVELOPING THEIR NATIONAL FBDGS





Technical Assistance at Country Level





FBDGsURUGUAY

GUÍA ALIMENTARIA PARA LA POBLACIÓN URUGUAYA

Para una alimentación saludable, compartida y placentera.



A una alimentación más saludable, compartida y placentera



Dirección General de la Salud Área Programática Nutrición

WHY+HOW-BARRIERS=COMMITMENT TO CHANGE

Ministerio de SALUD

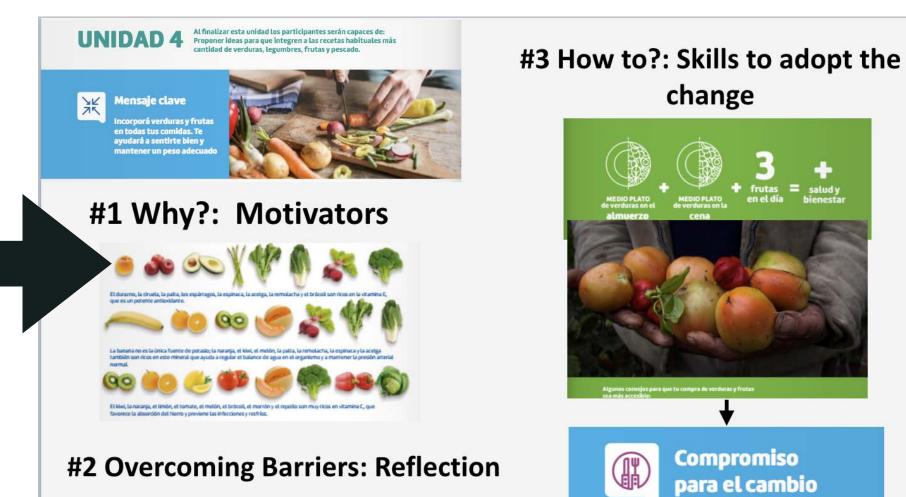
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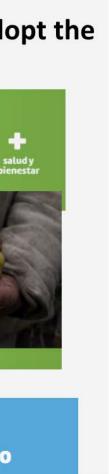
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Adapted from Marissa Burgermaster, Pam Koch, and Isobel Contento, DESIGN for Teachers. Presented at Society for Nutrition Education and Behavior Annual Conference, 2015 in Pittsburgh, PA.









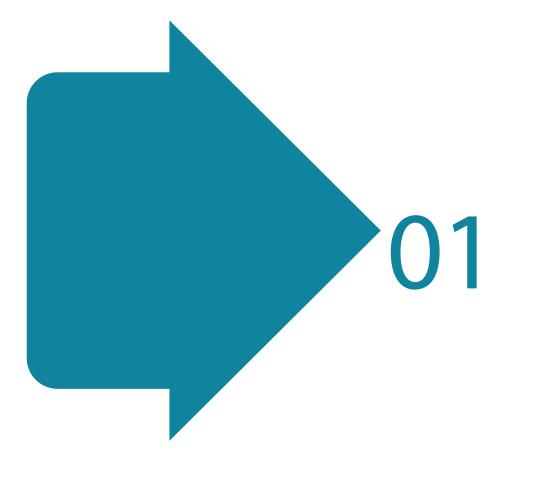


Compilation of FBDGs



Part Three

FAOS FBDGs Website: 90 Countries



FOR GLOBAL MAPPING & RESEARCH OF

FBDGS/FCCD GUIDES

AFRICA: 7

ASIA & PACIFIC: 17

NEAR EAST: 4

🔀 South Africa Asia and the Pacific 💶 Afghanistan 🔁 Australia Bangladesh 🔳 China 🌌 Fiji 🚾 India

Africa

🔚 Benin

📰 Kenya

Mamibia

Nigeria

Z Seychelles

🚍 Sierra Leone

Indonesia Japan 🖳 Malaysia

Mongolia

Nepal -----

03

CAPACITY DEVELOPMENT SECTION: WORKSHOPS, FORUMS

ood and Agriculture Organization f the United Nations About FAO I In Action I Countries I Themes I Media I Publications I Statistics I Partn 中文 English Français Русский Español العربية Food-based dietary guidelines

d-based dietary guidelines (also own as dietary guidelines) are tended to establish a basis for publ od and nutrition, health and cultural policies and nutrition ation programmes to foster health habits and lifestyles. They provi e on foods, food groups and tary patterns to provide the requi rients to the general public to

e overall health and preven



ssists Member Countries to develop, revise and implement food-based dietary guidelines and uides in line with current scientific evidence. FAO also carries out periodic reviews on progres de in the development and use of dietary guidelines, tracking changes in their overall focus and

neir nutrition situation, food availability, culinary cultures and eating habits. Jblish food guides, often in the form of food pyramids and food plates, which ucation <u>Read more</u>

ease note that individual country pages are only available in English.

Latin America and the Caribbean **North America** Canada Antigua and Barbuda United States 🔚 Argentina 🔚 Bahamas 🛃 Barbados Belize 🚾 Bolivia (Plurinational State of) S Brazil Chile 🔚 Colombia 💻 Costa Rica 🔚 Cuba 😹 Dominica Sepuration Republic El Salvador 🖂 Grenada

Guatemala

- 🔀 Guyana Honduras
- 🔀 Jamaica

1000 Plates, pyramids, planet. Developments in national healthy and sustainable dietary guidelines: a state of play assessment

Latest publications

Countries developing updating guidelines

- Guyana
- France Ecuador
- Tanzania

EUROPE 33

NORTH AMERICA: 2 UZ

LATIN AMERICA & CARIBBEAN: 27

PCCL OF CCUNIRY FCCAL POINTS FOR FBDGS

COMING IMPLEMENTATION & EVALUATION ASPECTS





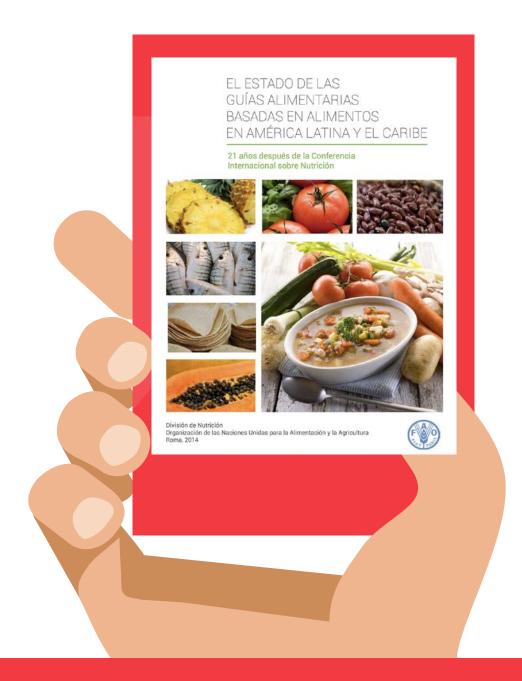


Development of Knowledge Products



Part Four

FAO'S FBOG'S RECENT KNOWLEDGE PRODUCTS



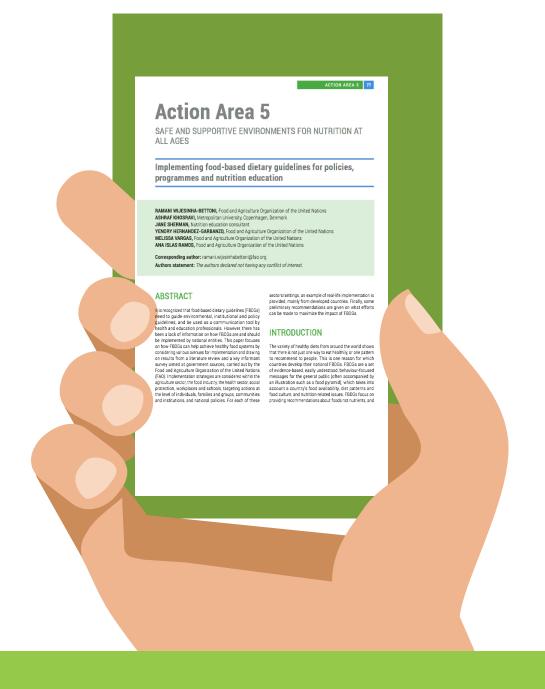


STATUS OF FBDGs IN LATIN AMERICA AND THE CARIBBEAN

Study on the current situation, needs & lessons learned



Review of FBDGs that address sustainability



FBDGs IMPLEMENTATION

Article on: Implementing food-based dietary guidelines for policies, programmes and nutrition education (manual coming soon)



FBDGs: REALITY & CHALLENGES AHEAD

Political will/Truly Multi-stakeholder Processes

Development & Implementation Issues

Limited Capacities & Resources





Developing Dietary Guidelines for Americans





President: The Society for Nutrition Education and Behavior Associate Editor: The Journal of Nutrition Education and Behavior **Chancellor: Daystar University in Kenya**





Mary Murimi, PhD, RD, LDN

- **Professor of Nutrition**
- **College of Human Sciences**
 - **Texas Tech University**



Dietary Guidelines for Americans

- The 1990 National Nutrition Monitoring and Related Research Act requires that the U.S. Departments of Health and Human Services and of Agriculture publish a new edition of the Dietary Guidelines for Americans every 5 years
- The guidelines should reflect current advancements in scientific knowledge on the relationship between nutrition and human health
- The guidelines further translates the science current at the time into sound food-based guidance to promote health in the United States
- The process has evolved from concerns of nutrient deficiencies and malnutrition in the beginning to disease prevention and over nutrition more recently



Purpose of The Dietary Guidelines for Americans

Provides evidence-based food and beverage recommendations for Americans ages 2 and older

These recommendations aim to:

- Promote health
- Prevent chronic disease
- •Help people reach and maintain a healthy weight
 - •Forms the basis of federal nutrition policy and programs
 - •Helps guide local, state, and national health promotion and disease prevention initiatives
 - Informs various organizations and industries, such as food product development





Dietary Guidelines: What It Is, What It Is Not

- •Translates science into food-based guidance toward a healthy and enjoyable diet
- •Helps individuals improve and maintain overall health, focusing on disease prevention and reducing the risk of chronic diseases
- •These Guidelines embody the idea that a healthy eating pattern is an adaptable framework in which individuals can enjoy foods:
 - •that meet their personal,
 - •cultural, and traditional preferences
 - •and fit within their budget
- •Is not intended to be used to treat disease





Hi

Concern: Nutrient Deficiencies



From Nutrient based to Food based

Nutrient based goals

- Increase consumption of complex carbohydrates and "naturally occurring sugars"
- Reduce consumption of refined and processed sugars, saturated fat, cholesterol, and sodium

Food based

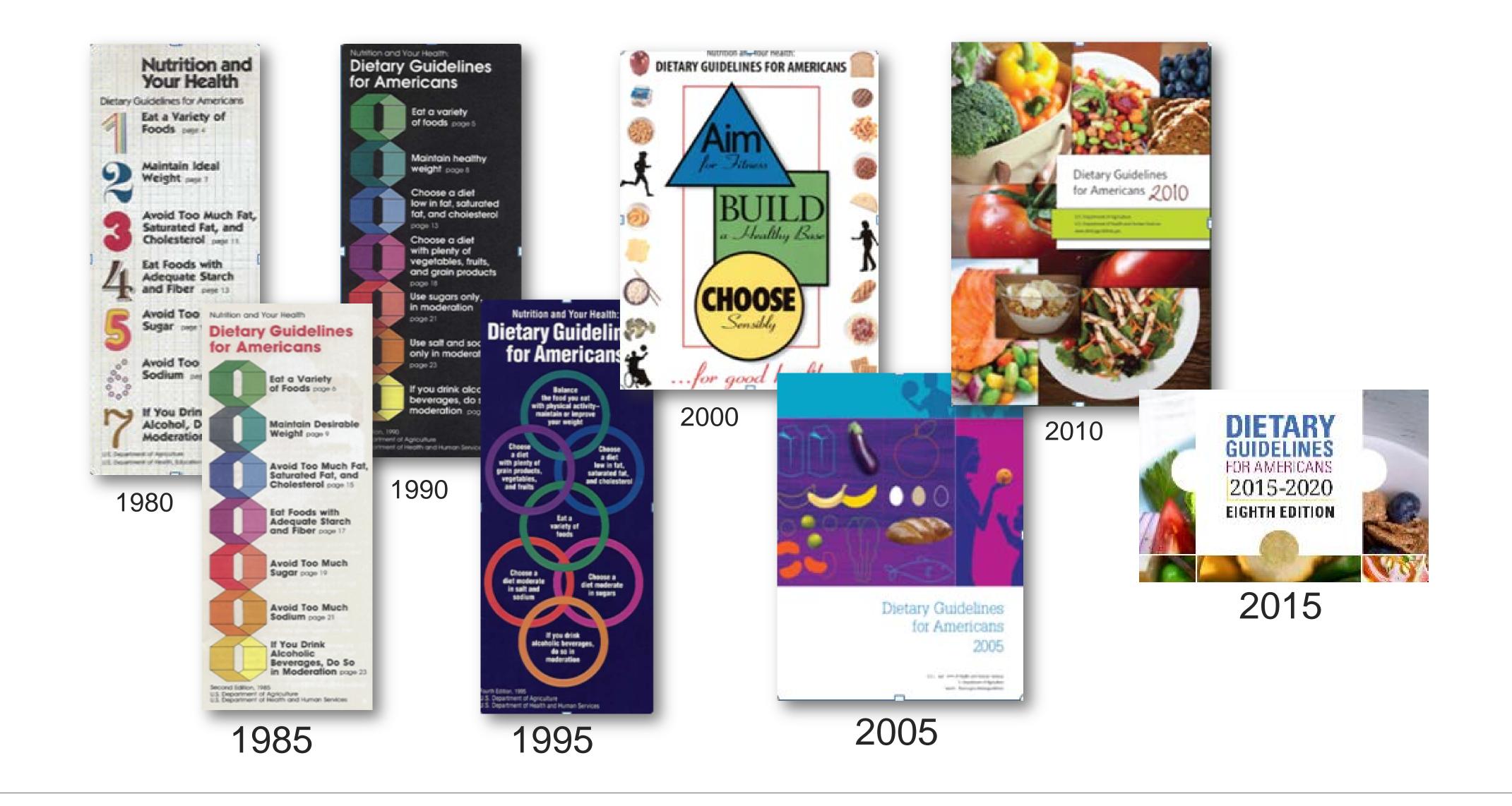
- Increase fruits, vegetables, and whole grains
- •Decrease
 - refined and processed sugars and foods high in such sugars;
 foods high in total fat and animal fat, and partially replace saturated
 - foods high in total fat and anin fats with polyunsaturated fats
 - eggs, butter fat and other high cholesterol foods
 - salt and foods high in salt

 Choose low-fat and non-fat dairy pro (except young children)

•Choose low-fat and non-fat dairy products instead of high-fat dairy products



Dietary Guidelines for Americans





Translating Science for Development of Dietary Guidelines Three Stage Process





Approaches

First edition to use a systematic review process

- Original systematic review
- Systematic review, meta analysis and reports
- Data analysis
- Food pattern and modeling analyses



Dietary Guidelines for Americans 2005





Review of Current Scientific Evidence

Committee to ensure sound external scientific advice to inform policy decisions

- health, and medicine.
- The committee is thoroughly vetted for conflicts of interest before they are appointed to their positions and are required to submit a financial disclosure form annually
- The committee reviews the previous edition of the Dietary Guidelines to determine the topics for which new scientific evidence was needed to inform the development of the new edition
- The public is invited to submit written/oral comments to the Advisory Committee throughout the entirety of its work

Review the Science

The Secretaries of HHS and of USDA appoint an external Dietary Guidelines Advisory The Advisory Committee members are prestigious researchers in the fields of nutrition,





Committee member requirements

Current knowledge in human nutrition and chronic disease Familiarity with the purpose, communication and application of dietary guidelines

Expertise was sought in several specialty areas:

- •Chronic disease e.g., cancer, cardiovascular disease, type 2 diabetes, overweight and obesity, and osteoporosis);
- •Energy balance;
- •Epidemiology;
- •Food processing science, safety, and technology;
- •General medicine;
- •Gerontology;
- •Nutrient bioavailability; nutrition biochemistry and physiology;
- •Nutrition education and behavior change;
- Pediatrics; maternal/gestational nutrition;
- •Public health;
- •And/or nutrition-related systematic review methodology









Development of *Dietary Guidelines*

- 1. Develop research questions
- 2. Create and implement literature search and sort plans
- 3. Develop evidence portfolios
- 4. Synthesize the bodies of evidence
- 5. Develop conclusion statements and grade the evidence
- 6. Describe research recommendations



Develop the Dietary Guidelines

than 25 years to inform the development of national guidelines for health professionals

or leading scientific organizations

the Advisory Committee's question of interest.

- **Original systematic reviews: The USDA Nutrition Evidence Library uses a systematic** review methodology designed to analyze food, nutrition, and public health science
 - •The medical field has used systematic reviews as the standard practice for more
- Review of existing systematic reviews, meta-analyses, and reports by Federal agencies
 - •The approach involved applying a systematic process to assess the quality of the existing review or report and to ensure that it presented a comprehensive review of



Data analyses: The Advisory Committee used national data from Federal agencies to answer questions about chronic disease prevalence rates; food and nutrient intakes of the U.S. population across age, sex, and other demographic characteristics; and nutrient content of foods.

•Data analyses tailored to a specific question helped inform the Advisory **Committee's recommendations**

- Food pattern modeling analyses:
 - •Estimates of diet quality in the USDA recommended Food Patterns
 - •The Food Patterns were developed to demonstrate how Dietary Guidelines recommendations can be met within an overall eating pattern.
 - •Specific needs such as selecting foods to increase vitamin D intake were assessed
 - •The results of the modeling analyses kept recommendations grounded within the structure of an overall healthy eating pattern







Shifts Needed to Align with Healthy Eating Patterns

Shift to healthier food and beverage choices while considering cultural and personal preferences



Implement the Dietary Guidelines



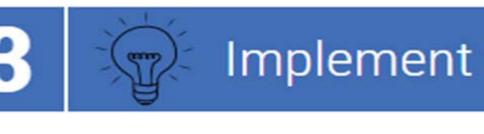
Overarching themes and Recommendations

The Problem:

cano

- •¹/₂ of all Americans have one or more preventable chronic diseases that are related to poor quality dietary patterns and physical in activity
- •2/3 adults and nearly $\frac{1}{2}$ of children and youth are overweight obese
- The Gap:
 - •Dietary patterns are suboptimal and causally related to poor individual and population health and higher chronic disease rates
 - •Few improvements in consumers' food choices have been seen in recent decades
 - •Diets are low in vegetables, fruits, and whole grain and high in sodium, calories, saturated fat, refined grains, and added sugars
 - •Under consumption of Vit. D, calcium, potassium, and fiber and iron in adolescents and females









	 Adolescents boys and girls have the lowest intake of vegetables Fruit intake low for almost all age and sex groups (with the exception of children aged 1-8 years) 	- The av consum refined a above the recommendation while the consum grains in below the recommendation
	Include a variety of vegetables from all of the	
Recommendations	subgroups – dark green, red	Eat grain
in the Dietary Guidelines 2015-	and orange, legumes (beans and peas), starchy, and	of which

others

fruits

Eat fruits, especially whole

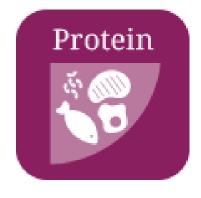
2020

grains

Implement the Dietary Guidelines







- verage
- nption of
- grains was
- he
- mendations,
- he average
- nption of whole
- ntakes was
- the
- mendation

Substantially below
recommendations,
except for your
children, 1-3 years of
age

Seafood
consumption was low
compared to
recommendations

ins, at least half ch are whole Fat-free or low-fat dairy, including milk, yogurt, cheese, or fortified soy beverages Consume a variety of protein foods, including seafood, lean meats and poultry, eggs, legumes (beans and peas), and nuts, seeds, and soy products







-The major source of added sugars (47%) in typical U.S. diet is beverages, which include soft drinks, fruit drinks, sweetened coffee and tea, energy drinks, alcoholic beverages, and flavored water.

Reduce added sugars consumption to less than 10% of calories per day

Recommendations in the Dietary **Guidelines 2015-**2020

Choose beverages with no added sugars, such as water **Reduce portions of sugar**sweetened beverages

Results

Implement the Dietary Guidelines



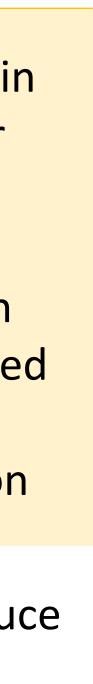


- Only 29% of the individuals in the U.S. consume amount of saturated fats consistent with the limit of less than 10 percent of calories
- Main source: mixed dishes (pizza, burgers, sandwiches, soups, among others)
- Reduce saturated fats intake to less than 10% of calories per day
- Change the ingredients of the mixed dishes to increase the amount of vegetables, whole grains, lean meat, low-fat or fat-free cheese

- Average intake of sodium in adult men is 4,240 mg per day, and for women the average is 2,980 mg
- Most sodium consumed in U.S. comes from salts added during commercial food processing and preparation

Shift to food choices to reduce sodium intake

Eating at home more often Limit sauces, mixes, and "instant" products, including flavored rice, instant noodles, and ready-made pasta



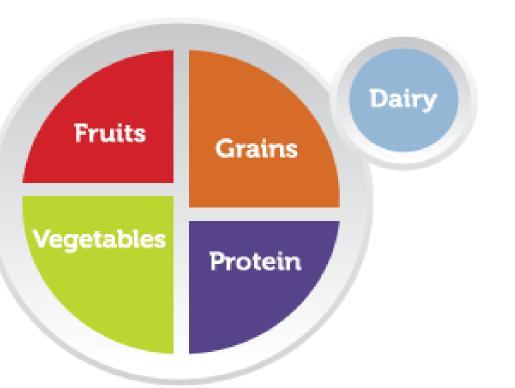






Five Overarching Guidelines

- 1. Follow a healthy eating pattern across the lifespan 2. Focus on variety, nutrient density, and amount 3. Limit calories from added sugars, saturated fats, and reduce
- sodium intake
- considering cultural and personal preferences
- 4. Shift to healthier food and beverage choices while 5. Support healthy eating patterns for all



Implement the Dietary Guidelines





Healthy Physical Activity Patterns

•Adults

Aim for 150 minutes of moderate intensity physical activity per week, and

>At least 2 days of muscle-strengthening exercises per week

•Youth ages 6-17 years

At least 60 minutes of physical activity per day including aerobic, muscle-strengthening, and bone-strengthening activities

Implement the Dietary Guidelines







Translating Science for Development of Dietary Guidelines

- Foster partnerships with food producers, suppliers, and retailers to HOME increase access to foods that align with the Dietary Guidelines Promote the development and availability of food products that align SCHOOL with the Dietary Guidelines in food retail and food service establishments WORKSITE Identify and support policies and/or programs that promote healthy
- eating and physical activity patterns
- Encourage participation in physical activity programs offered in various settings



Outreach to consumers about making healthy changes



Implement the Dietary Guidelines

COMMUNITY

FOOD RETAIL



Community gardens



Meal Planning



Active play



Active breaks

























Food Access

- Having access to healthy, safe, and affordable food choices
 Influenced by:
 - Proximity to food retail outlets
 - Individual resources
 - Neighborhood level resources
 - Race/ethnicity, socioeconomic status, geographic location, disabilities





Acculturation

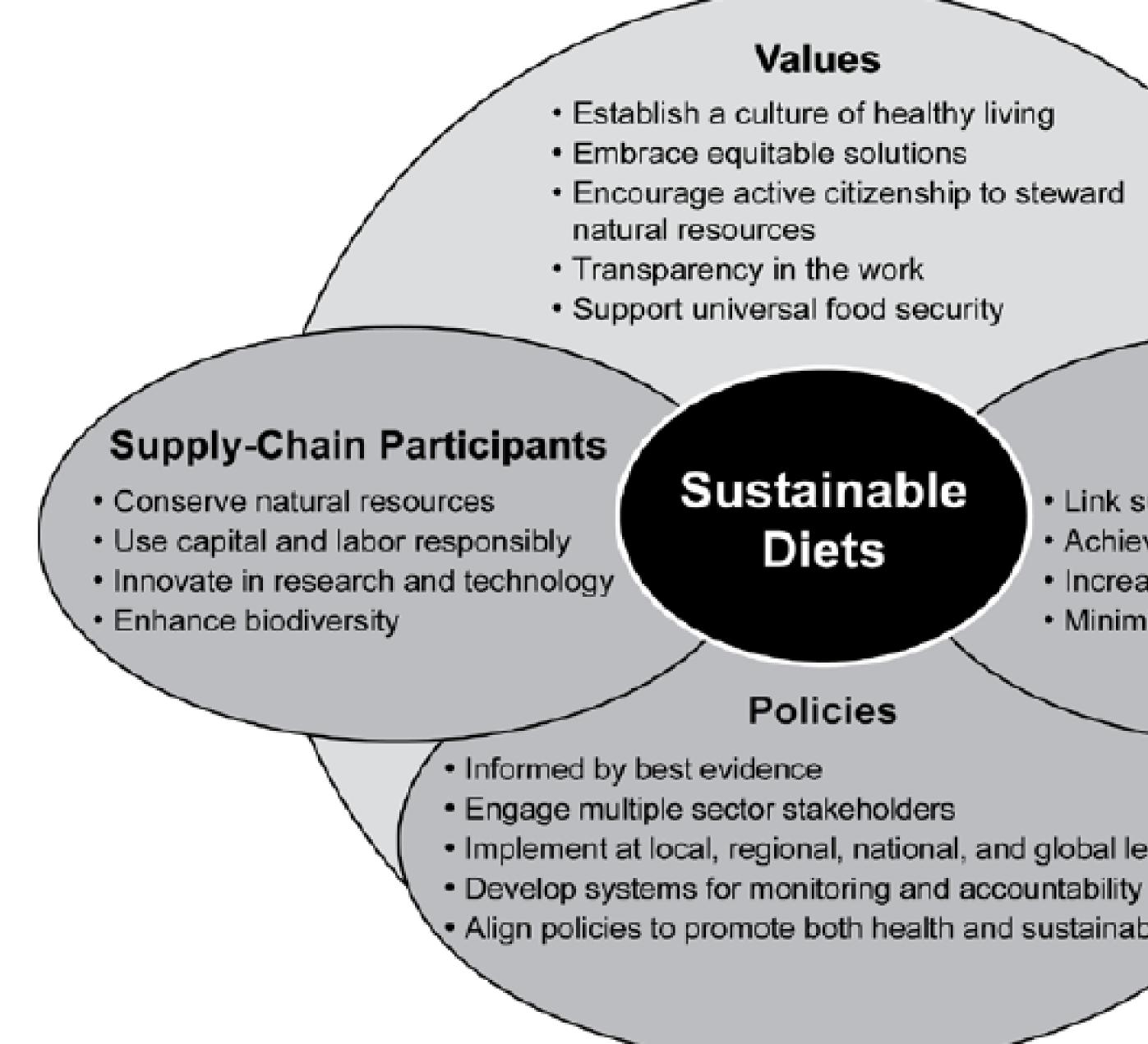
customs, beliefs, of a new culture associated with the originating country and those of the host culture

- •The process by which individuals adopt the attitudes, values,
- •A gradual exchange between the original attitudes and behaviors





Figure D5.1: Elements needed for sustainable diets



Values

- Encourage active citizenship to steward

Consumers

Link sustainability and healthy diets.

- Achieve healthy dietary patterns
- Increase demand for sustainable food.
- Minimize waste

Policies

- Implement at local, regional, national, and global levels.
- Align policies to promote both health and sustainability.









Everybody has a role with FBDGs: What's Yours?

Thank you very much!

For more info email us at: dietary-guidelines@fao.org

Brazil's Dietary Guidelines:

eat real food, together, in appropriate environments, and exercise cooking skills

Luiza Torquato, MS

Federal Council of Nutritionists Observatory of Food Security and Nutrition Policies

University of Brasília, Brazil



Food and nutrition scenario in Brazil



in the last 20 years



57% of Brazilian adults are **overweight** and 20.8% are **obese**



are close to R\$500 million/year



and with hypertension 14.2%



- The prevalence of **overweight** in adults has **increased three times**
- The overall **costs of obesity** to the Brazilian National Health System
- **Chronic Diseases are increasing!** The leading cause of death among adults! In 10 years, people who had been diagnosed with diabetes increased 61.8%
- People are replacing natural or minimally processed foods and preparation of meals based on these foods for ready-to-eat industrialized food products

(IBGE, 2008-2009; PNS, 2013; VIGITEL; 2016)



Dietary Guidelines for the Brazilian Population

guidelines! policies 2ª Edition Brasília - DF 2014

2014 – Launch of the new version of Brazilian's

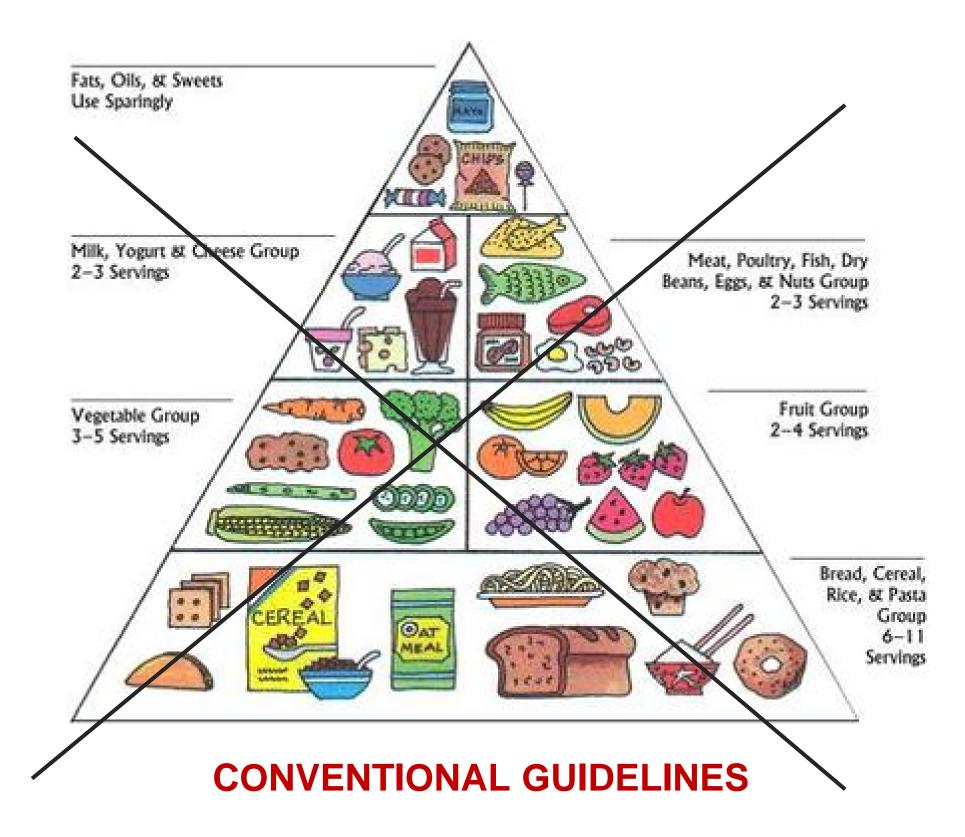
- Elaborated in a participatory manner and in consultation with multiple sectors of the society It has principles and recommendations to encourage and support adequate and healthy diets, personally and collectively
- Instrument to support food and nutrition educational activities and national food and nutrition programs and

WHAT IS NEW?





Dietary Guidelines for the Brazilian Population



1. DIET IS MORE THAN INTAKE OF NUTRIENTS!

Diet refers to intake of nutrients, but also to the foods that contain and provide nutrients; to how foods are combined and prepared in the form of meals; how these meals are eaten; and also to cultural and social dimensions of food choices, food preparation and modes of eating, all of which affect health and wellbeing

2. FOOD \neq FOOD PRODUCTS

3. CULINARY INGREDIENTS ≠ READY-TO-EAT FOOD PRODUCTS



Dietary Guidelines for the Brazilian Population





4. HEALTHY DIETS DERIVE FROM SOCIALLY AND **ENVIRONMENTALLY SUSTAINABLE FOOD**

SYSTEMS Recommendations need to take into account the impact of food production and distribution on social justice, local communities, biodiversity and environmental integrity

5. MANY FACTORS CAN POSITIVELY OR NEGATIVELY INFUENCE EATING PATTERNS

Knowing the characteristics and determinants of healthy diets can contribute to increase autonomy in making good food choices and to demand the fulfillment of the human right to adequate food





DIETARY GUIDELINES FOR THE BRAZILIAN POPULATION

CONTENTS

- Preface
- Preamble
- Introduction
- Chapter 1. Principles
- Chapter 2. Choosing foods
- Chapter 3. From foods to meals
- Chapter 4. Modes of eating
- Chapter 5. Understanding and overcoming obstacles
- Ten steps to healthy diets
- How to know more
- Annex A. Process of preparation of the Food Guide's new edition.

categories of food processing

how to combine, vary, select and conserve / examples of healthy meals

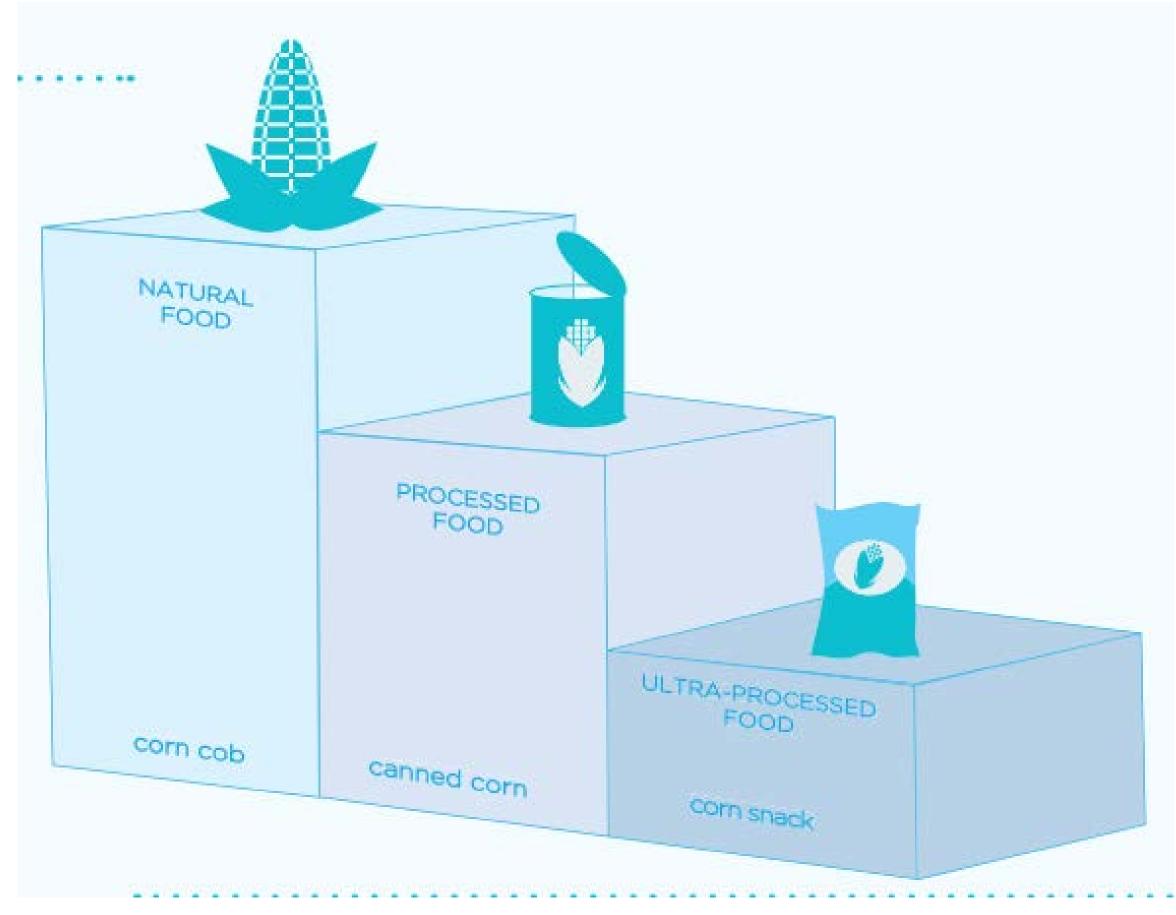
time and attention devoted / the environment / commensality

ideas and advice about information, supply, cost, skills, time and advertising





categories of food processing





NATURAL: obtained directly from plants or animals and purchased without any alteration **IINIMALLY PROCESSED FOODS:** natural foods which have been somewhat altered before being

OILS, FATS, SALT AND SUGAR: products that are extracted from the nature and used for seasonin and cooking food





ROCESSED FOODS: products that are manufactured essentially with the addition of salt or sugar natural or minimally processed foods

LTRA-PROCESSED FOODS processing techniques and ingredients, many of which are used exclusively by industry















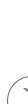






































Healthy meal options

BREAKFAST

LUNCH









DINNER



SMALL MEALS









TEN STEPS TO HEALTHY DIETS

- Make natural or minimally processed foods the basis of your diet
- 2. Use oils, fats, salt, and sugar in small amounts when seasoning and cooking_ natural or minimally processed foods and to create culinary preparations
- 3. Limit consumption of processed foods-
- Avoid consumption of ultra-processedfoods



In great variety and mainly of plant origin! So you will have a diet that are nutritionally balanced, delicious, culturally appropriate, and supportive of socially and environmentally sustainable food systems

In moderation, it contribute to diverse and delicious diets without making them nutritionally unbalanced

The ingredients and methods used in the manufacture of processed foods unfavourably alter the nutritional composition of the foods from which they are derived They are nutritionally unbalanced, tend to be consumed in excess, displace natural or minimally processed foods and their means of production, distribution, marketing, and consumption damage culture, social life, and the environment











TEN STEPS TO HEALTHY DIETS

- 5. Eat regularly and carefully in appropriate environments and, whenever possible, in company
- 6. Shop in places that offer a variety of natural or minimally processed foods

Develop, exercise and share cooking skills



Make your meals at regular times; avoid snacking; eat slowly and enjoy what you are eating, without engaging in another activity. Eat in clean, comfortable and quiet places, where there is no pressure to consume unlimited amounts of food. Eat in company: this increases the enjoyment of food and encourages eating attentively

Such as municipal and farmers markets or directly from producers. Prefer vegetables and fruits that are locally grown in season. Whenever possible, buy organic and agro-ecological based foods

If you have cooking skills, develop and share them with boys and girls. If you don't, acquire them. Learn from and talk with people who know, read books, check the internet, take courses...Start cooking!











TEN STEPS TO HEALTHY DIETS

8. Plan your time to make food and eating important in your life

9. Out of home, prefer places that serve freshly made meals

10. Be wary of food advertising and marketing



Plan the food shopping, organize your domestic stores, and decide on meals in advance. Share with family members the responsibility for all activities related to meals. Make the preparation and eating of meals privileged times of conviviality and pleasure.

> Self-service restaurants and canteens that serve food buffet-style charged by weight are good choices. Avoid fast food chains

> The purpose of advertising is to increase product sales, and not to inform or educate people. Be critical and teach children to be critical









STRATEGIES FOR ADEQUATE AND HEALTHY DIETS BASED ON THE DIETARY GUIDELINES

Education, communica-tion and information

Integral heath care

Promotion of healthy and adequate diets

Food regulation

Healthy settings





Materials available on the Ministry of Health website: http://dab.saude.gov.br/portaldab/biblioteca.php?conteudo=publicacoes

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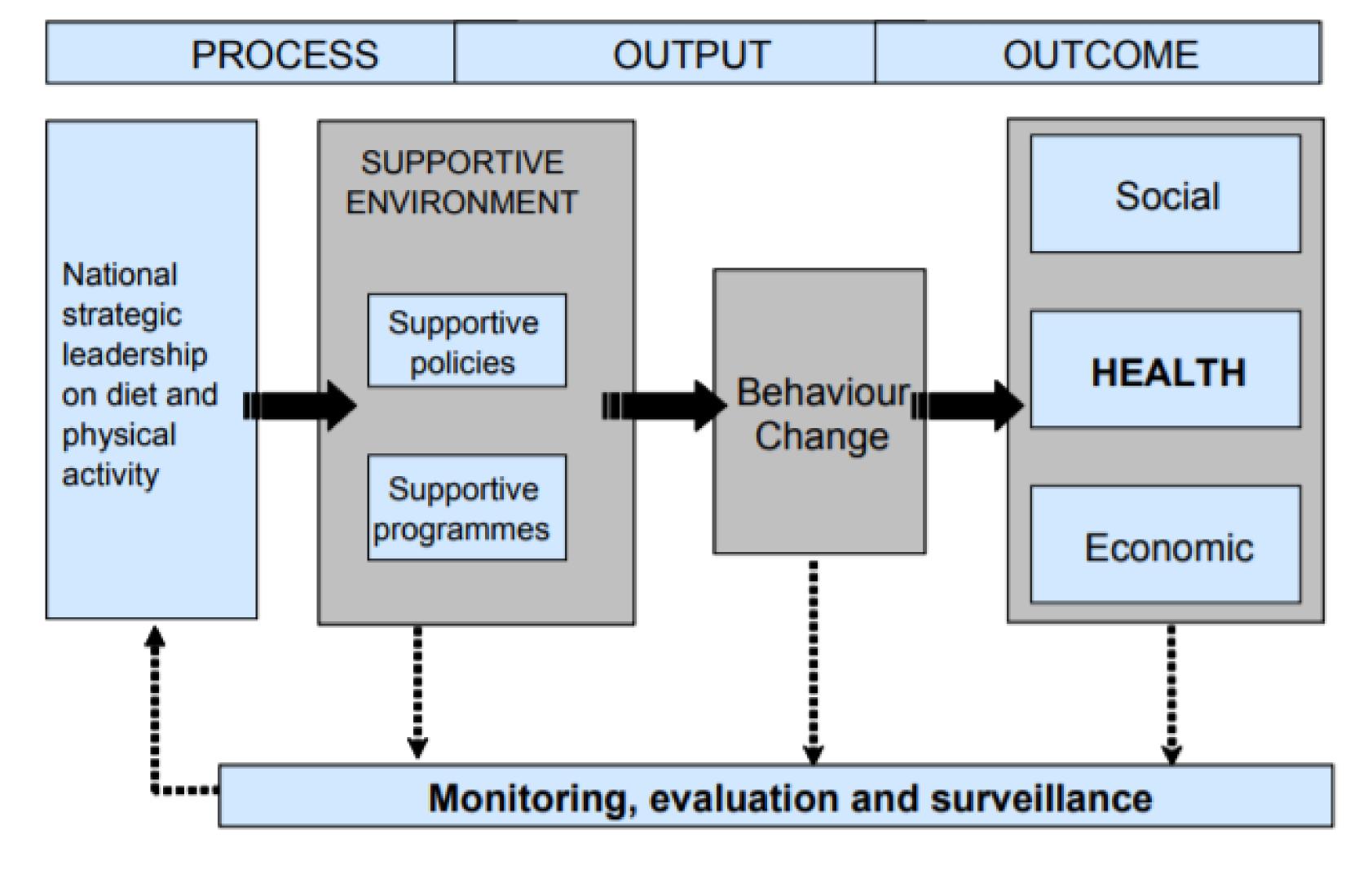
DIETARY GUIDELINES



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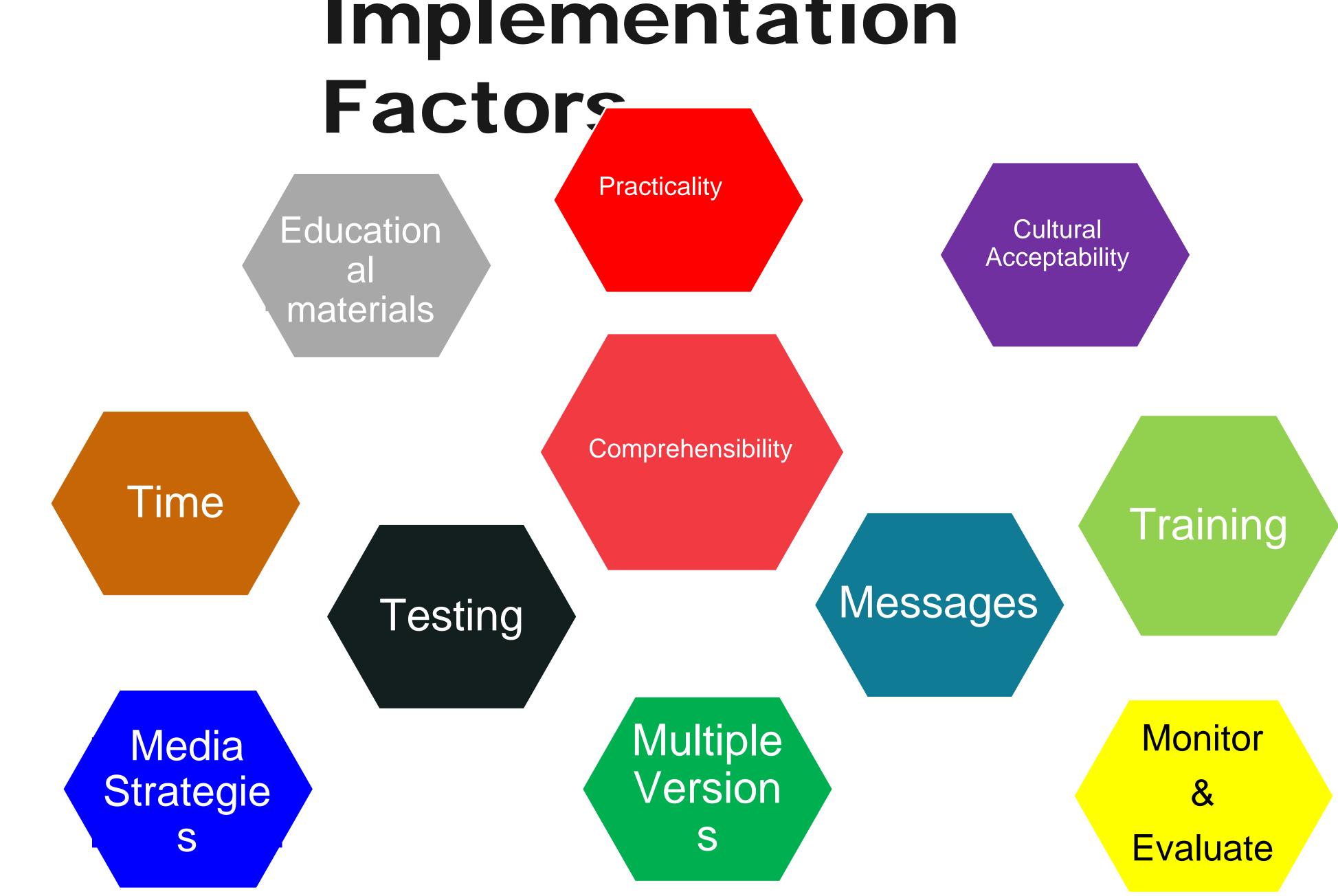


Framework for Implementation



WHO (2006) Global Strategy on Diet, Physical Activity and Health: A Framework To monitor and Evaluate Implementation. http://apps.who.int/iris/bitstream/10665/43524/1/9789241594547_eng.pdf





Source: FAO/WHO (1996) Preparation and Use of Food-Based Dietary Guidelines. http://www.fao.org/docrep/x0243e/x0243e00.htm



Question and Answer Time

